

TOWN OF LYME

JEFFERSON COUNTY
P.O. Box 66
CHAUMONT, NEW YORK 13622
PH: (315) 649-2788 FAX: (315) 649-2049

Checklist for Variance Application

Each Variance application should be complete with the following items:

- Page 2 completed
- Date and Signature on Page 3
- Page 4 completed if needed
- Pages 1, 2, and 3 of the SEQR form completed, signed and dated
- A drawing and map of the project with all measurements recorded
- 6 copies of all forms listed above

A completed Variance Application should be submitted to the Town of Lyme Office 10 days prior to the scheduled public hearing. The Zoning Board of Appeals meets the 3rd Wednesday of every month.

Please call ZBA Chairwoman Judi Bates at (315) 300-4016 with any questions.

Office Use

Receipt

Date Stamp

\$ _____ Fee () MO () Cash () Check # _____

Tax Parcel No. _____

Variance Application No. _____

Ref. Zoning Permit No. _____

Name: _____

**TOWN OF LYME
ZONING BOARD OF APPEALS
PO Box 66 Chaumont NY 13622, 315-649-2788, Fax 315-649-2049**

APPLICATION FOR AN AREA VARIANCE TO THE ZONING LAW

An Area Variance is only necessary if required by the Zoning Enforcement Officer as a condition of the granting of a Zoning Permit.

Directions: An application for a variance requires a public hearing prior to review by the ZBA. Presentation of the **complete** application to the Town Clerk, including the required fee, is required 10 days prior to the scheduled hearing. Hearings are held at the regular ZBA meetings. Publication in the local newspaper is required 5 days prior to the scheduled hearing.

Fee: An administrative processing fee of \$100.00 (cash/ check in US Funds) must accompany each application. Checks should be made payable to: "Town of Lyme".

The criteria that the ZBA shall use in the determination of granting, granting with conditions, or denial requires that **all** requested information be supplied. The following will also be considered and is required by NYS Town Law Section 267b.

TEST FOR GRANTING AREA VARIANCES

(Note: Completion of SEQR-State Environmental Quality Review Form, first page only, required)

- A. The ZBA shall have the power, upon an appeal from a decision or determination of the Zoning Enforcement Officer, to grant area variances.
- B. In making its determination, the ZBA shall take into consideration the benefit to the applicant if the variance is granted, as weighed against the detriment to the health, safety and welfare of the neighborhood or community by such a grant. In making such determination the ZBA shall also consider:
 - 1) Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance;
 - 2) Whether the benefit sought by the applicant can be achieved by some method, feasible for the applicant to pursue, other than an area variance;
 - 3) Whether the requested area variance is substantial;
 - 4) Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district; and
 - 5) Whether the alleged difficulty was self-created, which consideration shall be relevant to the decision of the ZBA, but shall not necessarily preclude the granting of the area variance.
- C. **The ZBA, in the granting of area variances, shall grant the minimum variance that it shall deem necessary and adequate and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community.**

IMPOSITION OF CONDITIONS

The ZBA shall, in the granting of area variances, have the authority to impose such reasonable restrictions and conditions as are directly related to an incidental to the proposed use of the property. Such conditions shall be consistent with the spirit and intent of the Zoning Law, and shall be imposed for the purpose of minimizing any adverse impact such variance may have on the neighborhood or community.

The following information is to be clearly printed in blue or black ink.

(If the property is not owned by the applicant, the applicant must submit a statement by the property owner authorizing the applicant to appeal on his/her behalf.)

PROPERTY OWNER: Name: _____
Applicant: _____
Mailing Address: _____
Email: _____

Telephone #: _____ Secondary Phone #: _____

Parcel Identification:
(Property being appealed) A. 911 Street Address _____
B. Real Property Tax Map No. _____
C. Copy of survey or tax map (attach)
D. Zoning District: _____ Agricultural/Rural Residence
_____ Resort (within 500' of water)

Section of Zoning Law being appealed or under review: _____
(Information provided by ZEO)

Justification: Attach reasons, in writing, why you should be granted the variance (review tests above). Include a drawing showing property lot lines (front, rear and sides) and the location of the proposed variance and the dimensions to the appropriate lot lines. For property review by the ZBA, corner stakes indicating the property lot lines and the variance location are **required**. Under certain circumstances, where there is a question concerning the actual location of the property lines, the ZBA may require an official survey document with official marking stakes in place. If the applicant has prior questions concerning the application he/she may request a pre-submission conference with the ZBA. Requests should be made to the ZBA in writing 5 days prior to the next scheduled meeting.

(Use additional sheet, page 4, if necessary)

Optional: Attach written releases from any owners of adjoining parcels indicating their support. List names addresses and tax parcel Number.

CERTIFICATION

I, the appellant, hereby affirm that the above and attached supporting information, if any, is true and accurate – to the best of my knowledge. If granted the action asked for, I agree to comply with the Zoning and Land Use Laws of the Town of Lyme. I further agree to abide by all environmental, health, building codes, rules and regulations applicable to this project and to allow appropriate Town officials access to this property at reasonable times for inspection purposes.

Applicant Signature

Date Submitted

If the applicant is not the owner or resident, then state the relationship below including contact information.

To be completed by Zoning Enforcement Officer:

I have reviewed the submitted application and find that all required information is sufficient for examination by the ZBA at the required hearing.

Date Application Received: _____

Date submitted to Chair, Zoning Board of Appeals: _____

Signature: _____

Date: _____

Where zoning permit involved, supply copy to ZBA Chairperson with this application.

ZEO Comments and/or recommendations: _____

ZBA Chair Review

Date

Signature of ZBA Chair

Misc. Information

Town of Lyme Website for Zoning Law:
Jefferson County Parcel Information:
property-search

<https://www.townoflyme.com/documents/lyme-zoning-2017-final/>
<https://www.jeffersoncountyny.gov/departments/RealProperty/gis-maps-property-search>

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/>
			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			NO <input type="checkbox"/>
			YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	NO <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	NO <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/>	

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest Agricultural/grasslands Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
49. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		

Project:

Date:

***Short Environmental Assessment Form
Part 2 - Impact Assessment***

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept “Have my responses been reasonable considering the scale and context of the proposed action?”

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7. Will the proposed action impact existing:		
a. public / private water supplies?		
b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Project:

Date:

Short Environmental Assessment Form Part 3 Determination of Significance

For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)